## UNITED STATES DISTRICT COURT DISTRICT OF OREGON

	JSTIN, on behalf of himself	f and Civi	Civil Case No. 3:14-cv-00706-YY			
all others simi				FOR SPECIAL		
Plaint	iff(s),	ADI	MISSION – PR	O HAC	VICE	
<b>v.</b>						
UNION BOI	ND & TRUST CO., et a	al.				
Defen	dant(s).					
Attorn	ey James A. Bloom	req	uests special ad	mission	pro hac vice in	
the above-capt						
	of Attorney Seeking <i>Pro I</i> of LR 83-3, and certify that <b>PERSONAL DATA:</b>			ındersta	and the	
	Name: Bloom	James		A.		
		(Last Name) (First Name) (MI) (Some or Business Affiliation: Schneider Wallace Cottrell Konecky Wotkyns LL				
	Mailing Address:	2000 Powell Street, Suit				
	City: Emeryville	State:			94608	
	Phone Number: (415) 4	Phone Number: (415) 421-7100		(415) 4	21-7105	
	Business E-mail Address	s: jbloom@schneiderwal	llace.com			

	AR ADMISSIONS INFORMATION:						
(a)	State bar admission(s), date(s) of admission, and bar ID number(s): Arizona - December 9, 2008 - SBN 026643						
<b>(b</b> )	Other federal court admission(s), date(s) of admission, and bar ID number(s): District of Arizona - February 12, 2009						
CI	ERTIFICATION OF DISCIPLINARY ACTIONS:						
(a)	I am not now, nor have I ever been subject to any disciplinary action by any state or federal bar association; or						
<b>(b</b> )	I am now or have been subject to disciplinary action from a state or federal bar association. (See attached letter of explanation.)						
CI	CERTIFICATION OF PROFESSIONAL LIABILITY INSURANCE:						
eq Sta	r LR 83-3(a)(3), I have professional liability insurance, or financial responsibility uivalent to liability insurance, that meets the insurance requirements of the Oregon ate Bar for attorneys practicing in this District, and that will apply and remain in force r the duration of the case, including any appeal proceedings.						
RI	EPRESENTATION STATEMENT:						
	representing the following party(s) in this case:						
I a							

	become a regi (See the Court	stered user of the Court's website at ord.uscou	•	lectronic Case File system. o electronic service pursuant
	<b>DATED</b> this 19th	day of October	, 2016	
			/s/James A. Bloom (Signature of Pro Hac County)  James A. Bloom (Typed Name)	
CERTI	FICATION OF ASSO	OCIATED LOCAL C	COUNSEL:	
			oar of this Court, that I his ignated local counsel in the	ave read and understand the this particular case.
	<b>DATED</b> this 20th	day of October	<u>, 2016</u>	
			s/Timothy DeJor	ng
			(Signature of Local Counse	1)
Name:	DeJong		nothy	S.
(Last Name) Oregon State Bar Number: 940662			t Name)	(MI) (Suffix)
Gregon Firm or	Business Affiliation:	Stoll Stoll Berne Loktin	g & Shlachter P.C.	
Mailing	Address: 209 S. W. C	Dak Street, Suite 500	<u> </u>	
City: Po		·	State: Oregon	Zip: 97204
	Number: (503) 227-16	00 Bu		tdejong@stollberne.com
		COURT	ACTION	
	•	oplication denied.		
			Judge	

**(6)** 

**CM/ECF REGISTRATION:**